



## **Program Details**

Effective January 1, 2006, eligible members with CIGNA medical and dental coverage may receive 100% reimbursement of copay or coinsurance for these services performed during pregnancy:

- Periodontal scaling and root planing (non-surgical dental procedure used to treat gum disease)
- Periodontal maintenance
- Frequency limitation for cleanings waived to allow an additional cleaning, because we recognize the potential for "pregnancy gingivitis"
- Treatment for inflamed gums around wisdom teeth

## Who Is Eligible

Members enrolled in a CIGNA medical plan and dental plan\*.

Annual maximums and out of network maximum reimbursable charges may apply for non-DHMO plans



## CIGNA Dental Oral Health Maternity Program<sup>SM</sup>

## **Turning Evidence Into Action**

The CIGNA Dental Oral Health Maternity Program<sup>SM</sup> is a benefit enhancement for members with both CIGNA medical and dental coverage\*. This first-of-its-kind program – a component of the CIGNA Dental Oral Health Integration Program<sup>SM</sup> – was created in response to mounting research indicating an increased probability of preterm birth for expectant mothers with gum disease.

Because healthier gums may lead to healthier babies

And healthier babies can deliver lower health care costs and happier, more productive employees.

An expectant mom's gum disease may indicate an increased probability of a pre-term birth. Pregnant women with chronic gum disease during the second trimester may be up to seven times more likely to give birth prematurely.<sup>1</sup>

Up to 14% of women develop diabetes during pregnancy, called "gestational diabetes." Moderate or severe gum disease may make it more difficult to control a diabetic's blood sugar.

Gum inflammation plays a possible role in the development of pre-eclampsia, a serious condition affecting approximately 5% of U.S. pregnancies.<sup>3</sup>

On the positive side... Good dental care is linked with a decreased risk of preterm birth. Periodontal scaling and root planing may reduce the risk of preterm birth in pregnant women. Researchers found as much as an 87% reduction of premature births in women who were treated for gum disease.<sup>4</sup>

Because one in eight babies is born too early

11% of newborns covered by employer health plans are born prematurely. According to the March of Dimes, direct health care costs for these births can be 15 times higher (\$41,610) than those for a healthy, full-term baby (\$2,830).

Care for preterm babies typically involves longer hospital stays, more frequent doctor visits and greater use of short-term disability benefits. There are many success stories, but some premature babies are not so lucky. They must fight to survive and face increased risks of lasting disabilities.

Because every baby deserves a healthy start

Receiving dental care during pregnancy is important, yet the ADA says most women don't visit the dentist – even if they are having dental problems. The best birth outcomes don't start in the delivery room. They are the product of planning, education, a healthy pregnancy, and good medical and dental care.

We hope this program helps educate and encourage pregnant members to seek appropriate dental care. It's a benefits solution designed to help individuals achieve their health care goals and help employers improve the health and well-being of their employees, reduce costs and improve productivity.

**For more information,** contact your CIGNA representative. Visit <a href="https://www.cigna.com/dental">www.cigna.com/dental</a>.

\*Standard benefit for new and renewing clients as of 7/1/06. ASO clients may opt out if desired. Prior to 7/1/06 ASO clients may opt in by signing an amendment to their ASO agreement.

CIGNA Dental refers to the following operating subsidiaries of CIGNA Corporation: Connecticut General Life Insurance Company, and CIGNA Dental Health, Inc., and its operating subsidiaries and affiliates.

<sup>1</sup> Journal of the American Dental Association, July 2001 "Oral Health During Pregnancy: An Analysis of Information." <sup>2</sup> Journal of the American Dental Association, October 2003 <sup>3</sup> March 2005, Journal of Periodontology <sup>4</sup> August 2003, Journal of Periodontology